

WIC STATE PLAN

FFY 2004

OUR VISION

Healthy women and children through effective nutrition education and services, nutritious foods and referrals to appropriate health and human services, delivered with integrity and respect for those we serve.

OUR MISSION

Deliver the highest quality services in the nation with integrity and respect to 100% of funded potential WIC eligible population as measured by health outcomes.

Our watchwords are:

Quality;

Integrity;

Respect; and

Services to 100% of funded potentially eligible clients.

Quality is a degree or grade of excellence. It is doing the right thing. It is the hallmark of how we want our services delivered both to our external and our internal customers.

Integrity is firm adherence to a code or standard of values. It is accountability, effective stewardship of federal and state funds, and the state or quality of being whole and balanced.

Customer service with respect is the willingness to show consideration or appreciation and the willingness to modify clinic or state agency systems whenever possible or necessary to satisfy customer needs and wants in an expeditious yet efficient manner. This premise should permeate the culture of the program, accommodating ethnic and cultural differences and families with special health care needs, following the Covey principle to “first seek to understand.”

To serve the maximum number of potentially eligible clients, Program managers must constantly strive for quality and integrity in order to serve the maximum number of potentially eligible clients within the limitations of the federal grant dollars.

By delivering quality services with integrity and respect, WIC will move closer to serving 100% of our funded potentially eligible population and ultimately contribute to better health outcomes for the families of Texas.

Goals and Objectives for Operation of the Program in FFY 2004

WIC Vendor Operations Division

Implement new Program rules and policies requiring WIC authorized vendors to purchase infant formula from licensed wholesale distributors, licensed retailers or directly from the manufacturer. These new rules and policies will be implemented with the new contract year beginning October 1, 2003, and are designed to help address the issue of infant formula theft in Texas.

Review the conclusions and recommendations presented by the vendor-pricing contractor, Burger, Carroll and Associates (BCA), and determine what changes need to be made to the competitive pricing system in Texas. Implement appropriate changes and use revised methodologies to comply with the requirements of the USDA Final Rule on Food Delivery Systems regarding collection of vendor overcharges during pricing analysis.

Develop policies and procedures that address vendor operations systems under the Electronic Benefits Transfer (EBT) pilot in El Paso. Coordinate development of procedures with WIC staff, particularly staff in the EBT Division, in order to ensure all aspects of vendor operations under EBT are considered. Continue work on how to process claims for the Farmer's Market Nutrition Program in the EBT environment.

WIC Electronic Benefits Transfer (EBT) Division

Implement an EBT pilot project in El Paso, Texas to deliver food benefits by smart card. Accomplish this task under the leadership of the EBT Planning Division in coordination with the Department of Human Services Lonestar Program, the Automation Planning Division of the Associateship for Family Health, other divisions of the WIC Program and local agency and vendor stakeholders.

Implement the statewide deployment of a Very Small Aperture Terminal (VSAT) satellite communications system for improved state/local communications linkage and the provision of interactive distance learning. Accomplish this task under the leadership of the EBT Planning Division in close coordination with the WIC Training and Technical Assistance Division and the Automation Planning Division of the Associateship for Family Health.

WIC Public Health and Nutrition Education (PHN&E) Division

In FY 2003, the program began work with a contractor, SumaOrchard, to conduct social marketing in Texas to help understand issues related to potential eligibles and no-shows. The research involved focus groups with clients and staff and local agency surveys and will be completed September 30, 2003. From this information, we will proceed with

developing resources to better enable our local agencies to increase and maintain caseload. In addition, as part of the same research being conducted by SumaOrchard information is being collected to provide local agencies with improved referral resources and these improvements will be implemented during 2004.

In FY 2003, the program implemented a Nutrition Education Evaluation with the University of Texas. Researchers looked at all aspects of nutrition education around the state to determine most effective methods and best practices for nutrition education in Texas WIC and the study will be completed by September 30, 2003. In FY 2004, the program will implement the recommendations.

Continue to participate in the Nutrition Services Integrity Initiative group. Plans are underway for developing training modules from the FIT KIDS teleconference content, video and power points information.

Continue participating as a key member in the TDH Nutrition and Physical Activity Workgroup established by the Commissioner of Health to meet the goals of the department for one coordinated strategy for the agency to address obesity and the general need for fitness for all citizens of Texas.

Begin operations of the on-line WIC Materials Catalog in early FY 2004. Ensure resolution of issues concerning the ordering system, such as back order efficiency, bulk orders, and the problem of the TDH Warehouse only accepting orders at certain times of the months from our local agencies.

Develop and implement a WIC Obesity Plan with the assistance of the Texas Association of Local WIC Directors and other state agency staff, including training staff. This comprehensive plan will include nutrition education initiatives for WIC along with staff training, wellness programs and an evaluation component.

Implement statewide Internet nutrition education lessons to be used by clients who prefer to complete nutrition education using their home computer. Evaluate effectiveness of this delivery method.

Continue to encourage and provide funds to local agencies to contract and/or hire registered dietitians for the clinics to provide high-risk counseling, help with quality assurance, training, and enhance the delivery of nutrition services. Provide assistance to registered dietitians who need additional training.

Continue promoting literacy by providing reading books for children and reading lessons for nutrition education. An evaluation of the reading effort is ongoing and results from this study will assist us to develop the reading initiative for 2004.

Continue to increase breastfeeding initiation and duration rates through coordinated education, support and promotion efforts, along with the distribution of breast pumps, the

peer counseling program and staff training. Continue looking at the feasibility of eliminating or greatly reducing sample formula distribution.

Monitor issuance rates of contract and non-contract formulas, as well as sample contract formulas.

Focus on increasing African American breastfeeding initiation and duration rates through the implementation of the use of breastfeeding promotion materials targeting African American moms, fathers and grandmothers.

Begin implementing the Center for Disease Control's Pediatric Nutrition Surveillance at the completion of feasibility testing which occurred in FY 2003.

Continue the project begun in FY 2003 for development of a data management plan to include monthly meetings between program staff and staff from the Research and Public Health Assessment Division of the Associateship for Family Health. The plan development will include analysis of data resources and constraints, research priorities, and ongoing routine needs leading to a final plan for use and management of WIC client data.

WIC Policy Administration and Training Division

Work in coordination with the EBT Division to develop a plan for EBT vendor training in El Paso and implement it.

Work in coordination with the PHN& E and EBT Divisions, and the Texas Association of Local WIC Directors to develop a procedure for clinic flow for the EBT pilot in El Paso. Develop policies related to the implementation of the procedures. Develop a plan for training local agency staff and implement the plan prior to the EBT pilot.

Continue with implementation of the statewide deployment of a Very Small Aperture Terminal (VSAT) satellite communications system for improved state/local communications linkage and the provision of interactive distance learning. The goal for completion is December 2003.

Continue to work closely with the Texas Association of Local WIC Directors to fine tune the local agency funding formula to ensure WIC services can be delivered to the most clients possible with excellence and quality.

Continue to work in coordination with the Associateship for Family Health's Quality Assurance Monitoring Division to address all aspects of the quality assurance process with a focus on 1) ensuring local agencies are monitored for quality services according to objective criteria and 2) revising the tools used to monitor local agency clinical operations and 3) continuing to participate in the annual risk assessment of WIC local

agencies to prioritize contractors by the risk for potential shortfalls in delivering quality services.

Work in coordination with the QA monitoring section to develop a standard procedure to assure that all local agency referrals are followed up in appropriate time frames.

Develop a central filing system (either paper or electronic) to document all state agency interactions with WIC local agencies. Develop procedures surrounding this system and work with appropriate state agency personnel to assure that the procedures are established and followed.

Continue the work begun in FY 2003 for the development of a civil rights training module that addresses health disparities, a problem that is well documented as existing both in access to care and quality of care. The problem of health disparities is one component of the TDH Commissioner of Health's priorities for improving health access and prevention.